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Docket No.: M-8231 US

April 14, 2000

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jc715 U.S. PTO  
09/549451  
04/14/00

Box Patent Application  
Assistant Commissioner for Patents  
Washington, D. C. 20231

Enclosed herewith for filing is a patent application, as follows:

Inventor(s): Bluth, Charles; Bluth, James  
Title: Health Care Information System  
X Return Receipt Postcard  
X This Transmittal Letter (in duplicate)  
23 page(s) Specification (not including claims)  
8 page(s) Claims  
1 page Abstract  
18 Sheet(s) of Drawings  
3 page(s) Declaration For Patent Application and Power of Attorney (unsigned)  
2 page(s) Assignment

**CLAIMS AS FILED**

| For                      | Number<br><u>Filed</u>   |       | Number<br><u>Extra</u> |   | Rate    |   | Basic Fee |
|--------------------------|--|-------|------------------------|---|---------|---|-----------|
| Total Claims             | 35   | -20 = | 15                     | x | \$18.00 | = | \$ 270.00 |
| Independent<br>Claims    | 3  | -3 =  | 0                      | x | \$78.00 | = | \$ 0.00   |
| <input type="checkbox"/> | Fee of \$260.00 for the first filing of one or more<br>multiple dependent claims per application |       |                        |   |         |   | \$ 0.00   |
| <input type="checkbox"/> | Fee for Request for Extension of Time  |       |                        |   |         |   | \$        |

Please make the following charges to Deposit Account 19-2386:

- ☒ Total fee for filing the patent application in the amount of \$ 960.00  
☒ The Commissioner is hereby authorized to charge any additional fees which may be  
required, or credit any overpayment to Deposit Account 19-2386.

EXPRESS MAIL LABEL  
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Respectfully submitted,

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